

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney Docket No.
J6674(C)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

STABLE SKIN CONDITIONING COMPOSITIONS CONTAINING RETINOID BOOSTERS

the specification of which (check only one item below):

☒ is attached hereto.☐ was filed as United States application Serial No. _____ on _____ and was amended on _____ (if applicable)☐ was filed as PCT international application _____ on _____ and was amended under PCT Article 19 on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119

I hereby claim the benefit under Title 35, United States Code §119(e) of any of any United States provisional application(s) listed below:

PRIOR U.S. PROVISIONAL APPLICATION(S) FOR BENEFIT UNDER 35 U.S.C. 119(e)

APPLICATION NUMBER	DATE OF FILING (day, month, year)
60/258,455	December 28, 2000

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120.

U.S. APPLICATIONS		STATUS (CHECK ONE)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED

PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

CUSTOMER NUMBER: 000201

Direct all correspondence to : CUSTOMER NUMBER 000201

201

FULL NAME OF INVENTOR	FAMILY NAME CHANDAR	FIRST GIVEN NAME Prem	SECOND GIVEN NAME
RESIDENCE AND CITIZENSHIP	CITY Closter	STATE OR FOREIGN COUNTRY New Jersey	COUNTRY OF CITIZENSHIP Malaysia
POST OFFICE ADDRESS	POST OFFICE ADDRESS 24 Smith Court	CITY Closter	STATE & ZIP CODE/COUNTRY New Jersey 07624

202

FULL NAME OF INVENTOR	FAMILY NAME ZHOU	FIRST GIVEN NAME Yan	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Montville	STATE OR FOREIGN COUNTRY New Jersey	COUNTRY OF CITIZENSHIP United States
POST OFFICE ADDRESS	POST OFFICE ADDRESS 6 Crest Terrace	CITY Montville	STATE & ZIP CODE/COUNTRY New Jersey 07045

203

FULL NAME OF INVENTOR	FAMILY NAME GRANGER	FIRST GIVEN NAME Stewart	SECOND GIVEN NAME Paton
RESIDENCE & CITIZENSHIP	CITY Paramus	STATE OR FOREIGN COUNTRY New Jersey	COUNTRY OF CITIZENSHIP United Kingdom
POST OFFICE ADDRESS	POST OFFICE ADDRESS 780 Hilton Place	CITY Paramus	STATE & ZIP CODE/COUNTRY New Jersey 07652

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney Docket No.
J6674(C)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

CUSTOMER NUMBER: 000201

Direct all correspondence to : CUSTOMER NUMBER 000201

204

FULL NAME OF INVENTOR	FAMILY NAME SCOTT	FIRST GIVEN NAME Ian	SECOND GIVEN NAME Richard
RESIDENCE AND CITIZENSHIP	CITY Allendale	STATE OR FOREIGN COUNTRY New Jersey	COUNTRY OF CITIZENSHIP United Kingdom
POST OFFICE ADDRESS	POST OFFICE ADDRESS 9 Pine Road	CITY Allendale	STATE & ZIP CODE/COUNTRY New Jersey 07401

205

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

206

FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE